



Additional Information for the Registration of a marriage with the Swiss civil status authorities (for internal use only)

Form to be duly completed and signed by husband and wife

Exact Place and Date of Marriage: _____

Husband:

Last name(s):		
Name(s):		
Place and date of birth:		
Place of origin (for Swiss citizens) or nationality:		
Civil status at time of marriage:	<input type="checkbox"/> single	<input type="checkbox"/> divorced <input type="checkbox"/> widower
Last name(s) and name(s) of father:		
Last name(s) and name(s) of mother:		

Wife:

Last name(s):		
Name(s):		
Place and date of birth:		
Place of origin (for Swiss citizens) or nationality:		
Civil status at time of marriage:	<input type="checkbox"/> single	<input type="checkbox"/> divorced <input type="checkbox"/> widow
Last name(s) and name(s) of father:		
Last name(s) and name(s) of mother:		

Last name(s) after marriage:

Husband:
Wife:

Place and date _____

 Husband's signature

 Wife's signature

5ta Avenida, No 2005
 entre 20 y 22
 Miramar, Playa
 La Habana 11300

+53 (0)7 204 26 11
 +53 (0)7 204 11 48
 Phone: +41 (0)31 324 18 46 (47)
 Fax: +41 (0)31 324 18 49
hav.vertretung@eda.admin.ch
www.eda.admin.ch/havana